## STATE OF WYOMING DEPARTMENT OF ENVIRONMENTAL QUALITY LAND QUALITY DIVISION HERSCHLER BUILDING, 3RD FLOOR 122 WEST 25TH STREET CHEYENNE, WY 82002

## OTHER MINERALS

## RECLAMATION PERFORMANCE BOND INCREASE/DECREASE RIDER

	To be attached to and form a part of Surety Company Bond No	, WRITTEN
BY		, AS SURETY, on behalf
of		, AS PRINCIPAL, in the sum
of		, Dollars (\$),
in favo	or of the State of Wyoming and executed on	
	Whereas, the Department of Environmental Quality, Land Quality D	ivision, issued
	(Permit to Mine, Ten Acre Permit, License to Explore	number
	by Dozing, Notification of Intent to Explore for Coal by Drilling, Notification of Intent to Explore Non-Coal Minerals by Drilling, In Situ R&D Testing License)	
dated _	, and permit amen	ndment(s), numbered and dated
	pursuant to the application of the Principal,	
	Whereas, said bond and rider shall cover any and all lands affected or	to be affected by the operation under the above mentioned
notific	eation or permit, and amendment(s) since the date of issuance,	
	Now, therefore, the amount of the bond is increased/decreased by	Dollars
(\$	), to a total sum of	Dollars
(\$	), to cover the additional/reduced cost of reclaim	ing all affected lands. It is further understood and agreed
that all	l other terms and conditions of this bond shall remain unchanged.	
	INITIAL DAT	ΓΕ

FORM2OTH3

Permit No. \_\_\_\_\_

3/01

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Bond No.		

## PRINCIPAL

	Signed and executed this day of, 20:		
BY:			
TITLE: _	(please print or type)	(Corporate Seal)	
State of	) )SS.		
County	of)		
this	The foregoing instrument was acknowledged before me by day of, 20	(Name of Principal Signatory - please print or type)	
Witness my hand and official seal.		(Notary Public or other authorized officer)	
		Title (Name printed or typed)	
		My Commission Expires:	
	SURE	ГҮ	
	Signed and executed this day of, 20:		
	(please print or type)	(Corporate Seal)	
State of County			
this	The foregoing instrument was acknowledged before me by day of	(Name of Principal Signatory - please print or type)	
Witness my hand and official seal.		(Notary Public or other authorized officer)	
		Title (Name printed or typed)	
		My Commission Expires:	
Approve	ed as to form and execution:		
	Attorney General		
BY:	Assistant	Date:	
	VED:Administrator, Land Quality Division	Date:	